PTO/SB/22 (12-04)

Approved for use through 07/31/2006, OMB 0651-0031

U.S. Patient and Trademark Office; U.S. DEPARMENT OF COMMERCE

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THE NAME OF THE NAME OF	Docket Number (C	CENTRAL FAX CE							
PETITION FOR EXTENSION OF TIME UNDER	0145P34US	1							
FY 2005 (Fees pursuant to the Consolidated Appropriations Act.	014313400	MAR 2 4 20							
Application Number 10/627,615		Filed July 2	8, 2003						
For Melvin C. Maki									
Art Unit 2636			ent Swarthou						
This is a request under the provisions of 37 CFR 1.13 application.				1					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):									
	<u>Fee</u>	Small Entity F	ee						
	\$120	\$60	s <u>120.</u>	00					
Two months (37 CFR 1.17(a)(2))	\$450	\$225	, \$ <u> </u>						
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$						
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$						
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	s						
Applicant claims small entity status. See 37 CFR	1.27.		•						
A check in the amount of the fee is enclosed									
Payment by credit card. Form PTO-2038 is			Dananit Account						
The Director has already been authorized to									
The Director is hereby authorized to charge Deposit Account Number 16-0600	any fees which may	be required, or e enclosed a du	credit any overpa plicate copy of the	ayment, to nis sheet.					
WARNING: Information on this form may become p	public. Credit card inform	nation should not l	be included on this	form.					
Provide credit card information and authorization of	on PTO-2038.	•							
1 am the applicant/inventor.				ŀ					
assignee of record of the enti	re interest. See 37 0	CFR 3.71.							
Statement under 37 CFR	3.73(b) is enclosed (Form PTO/SB/9	6).						
attorney or agent of record. F	Registration Number	47,325	· ·						
atterney or agent under 37 C	FR 1.34.								
Registration number if acting und	der 37 CFR 1.34		-	` <u></u>					
		Mai	ch 24, 2005						
Signature			Date	Ĭ					
Dennis S.K. Leung		(613)	232-5300						
Typed or printed name			Telephone Number	1					
NOTE: Signatures of all the inventors or assignaes of record of the	entire interest or their repres	entative(s) are required). Submit multiple forms	if more than one					
signature is required, see below.	are submitted.			j					
Total of forms	are sublimited.		he audioudich le to file	Land by the					

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to userful confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the includual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, ourments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (12-04v2) Approved for use through 07/31/2006, OMB 0851-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Panerwork	Reduction A	ct of 1995	niunan ana andanan on	ed to re	soond to a collection	of inton	mation unites: it	dischara a vali	d OMB control number			
Effective on 12/08/2004.				Complete if I			Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Num	ber	10/627,615						
FEE TRANSMITTAL				Filing Date		July 28, 20	03					
For FY 2005				First Named Inv	entor	Melvin C. N	laki					
					Examiner Name	miner Name Brent Swarthout						
Applicant claims small entity status. See 37 CFR 1.27				{	Art Unit		2636					
TOTAL AMOUNT OF PAYMENT (\$) 120.00					Attorney Docket	No.	0145P34U					
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 16-0600 Deposit Account Name: Shapiro Cohen												
Perposit Account Deposit Account Number: 15-1000 Perposit Account Value Deposit Account Perposit Account Value Deposit Account Value												
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee												
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17												
Under 37 CFR 1.15 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
FEE CALCULA		•										
1. BASIC FILING	3, SEARCI	H, AND E	XAMINATION F	EES			 					
	·	FILING F	EES mall Ent <u>ity</u>	\$EAF	RCH FEES Small Entity	EXA	NOITANIM. <u>Ellems</u>	FEES intity				
Application Ty	<u>rpe !</u>	Fee (\$)	Fee (\$)	Fee (5		<u>Fe</u>	e (\$) Fee		Fees Pald (\$)			
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Design		200	100	100	50	13	3 0 6 5					
Plant		200	100	300	150	10	50 80	-				
Reissue		300	150	500	250	60	00 300) .				
Provisional		200	100	0	0		0 0					
2. EXCESS CL							Fe		all Entity Fee (\$)			
Fee Descriptio Each claim o		ludina R	eissnes)				_	50	25			
Each claim o	ident claim	over 3 (including Reissu	es)			-	200	100			
Multiple dep	endent clai	ims	,	•				360	180			
Total Claims					ee Paid (\$)			Multiple Dependent Claims Fee (\$) Fee Paid (\$)				
- 20	O or HP =		or, if greater than 20.	- = - -			<u>.</u>	ee (\$)	7 88 F 310 T91			
Indep. Claims		xtra Clair		Eg	e Pald (\$)			 				
-3	or HP =	ndnet etalm	x s paid for, if greater th	=	<u> </u>							
TC41			exceed 100 sheet	sofp	aper (excluding	electr	onically file	a sequence	ch additional 50			
listings un	der 37 CFF	₹ 1.52(e)), the application	SIZE I	ee due is 3230 ((3122 .16(s).	TOI SHIMITE CIT	11,7 101 001				
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (S) Fee Paid (S)												
-100 = /50 = (round up to a whole number) x =												
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)												
120.00												
Other (e.g., late filing surcharge): Extension of time												
SUBMITTED BY		\ 			Registration No	·		Telephone	(613) 232-5300			
Signature Registration No. 47,325 Telephone (613) Date March 24, 2												
Name (Print/Type)	Dennis S.K.	Leung	<u> </u>					nate watch	1 24, 2000			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 milnutes to complete. USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 milnutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments including gathering, preparing, and submitting the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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